

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000048535

FILED  
Apr 15, 2010  
Secretary of State

Entity Name: AVIGNON INSURANCE, CORP

## Current Principal Place of Business:

1915 NE 45TH ST.  
SUITE 106  
FT LAUDERDALE, FL 33308

## New Principal Place of Business:

1915 NE 45TH ST.  
SUITE 106A  
FT LAUDERDALE, FL 33308

## Current Mailing Address:

1915 NE 45TH ST.  
SUITE 106  
FT LAUDERDALE, FL 33308

## New Mailing Address:

1915 NE 45TH ST.  
SUITE 106A  
FT LAUDERDALE, FL 33308

FEI Number: 27-0296055

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

AVIGNON, MARIE  
1915 NE 45TH ST  
SUITE 106  
FT LAUDERDALE, FL 33308 US

## Name and Address of New Registered Agent:

AVIGNON, MARIE Y  
1915 NE 45TH ST  
SUITE 106  
FT LAUDERDALE, FL 33308 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: MARIE Y. AVIGNON

04/15/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P  
Name: AVIGNON, MARIE Y  
Address: 3680 INVERRARY DR. APT 3E  
City-St-Zip: LAUDERDALE, FL 33319

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARIE Y AVIGNON

PRES

04/15/2010

Electronic Signature of Signing Officer or Director

Date